Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY	
ТО	TAL CLAIMS		16				ſ	RATE	FEE		RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA		Ī	BASIC FEE	375.00	OR	BASIC FEE	750.00
то	TAL CHARGEA	BLE CLAIMS	16 minus 20=		* 0			X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	2 mi	nus 3 =	* 0			X42=	ر .	OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=	-	OR	+280=	
* If the difference in column 1 is less than zero, enter					r "0" in c	column 2	L	TOTAL	375	OR	TOTAL	
	С		MENDED - PART II			(Column 2)		SMALL E	ENTITY	OR	OTHER SMALL	
	(Column 1) CLAIMS		(Colu		IIII 2) IEST	(Column 3)	r	SWALL) I		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Mirius	***		=	Ī	X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEI	E DEPENDENT C		М	Ì	+140=			+280=	
1, 9, TOTAL										OR	TOTAL	
			ļ	ADDIT. FEE		OR	ADDIT. FEE					
	-	(Column 1)		(Colu		(Column 3)	1					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREV	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
Ľ	FIRST PRESE	ULTIPLE DEI	PENDEN	CLAIM			+140=		OR	+280=		
	TOTAL ADDIT. FEE									OR	TOTAL ADDIT. FEE	
	(Column 1)(Column 2) (Column 3)											
		CLAIMS		HIGH	IEST		Г		ADDI-	1		ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	155	OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=			X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDEN		CLAIM			742-		OR	704-	
		and laterathers	h		- 101			+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Pr viously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE	
		nber Previously Pa					r fou	nd in th app	propriate bo	x in co	lumn 1.	